MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Draft

Meeting Name:	IPRS Core Team Meeting
Facilitator:	Eric Johnson, DMH
Scribe:	Brandon Carter
Date:	12/07/05
Time:	10:00am - 11:00 a.m.
Location:	Waters Edge, Executive Conference Room

IPRS Core Team Attendees:

	Sharlene Bryant	**Others:**	
x	Cathy Bennett	x	Tim Sullivan
	Cheryl McQueen	x	Jamie Herubin
x	Shannon Johnson	x	Sandy Flores
	Gary Imes		Sara Parks
x	Joyce Sims	x	Mike Frost
x	Brandon Carter		Linda Smith
	Rick Debell		Jay Dixon
x	Thelma Hayter	x	Paul Carr
x	Eric Johnson	x	Marjorie Morris

Attendees:

x	Alamance-Caswell	x	Onslow
x	Albemarle	x	OPC
x	Catawba	x	Pathways
x	Centerpoint	x	Pitt
x	Crossroads		Roanoke-Chowan
x	Cumberland	x	Rockingham
x	Durham	x	Sand hills Center
x	Eastpointe	x	SE Center
x	Edgecombe-Nash	x	SE Regional
x	Five – County MHA	x	Smoky Mountain
x	Foothills	x	Tideland
x	Guilford	x	Wake
x	Johnston	x	Western Highlands
x	Mecklenburg	x	Wilson-Greene
x	Neuse	x	NC Council
x	New River		

Attendees:		
Item No.	**Topics**	
1.	**Division and EDS Review**	**Review checkwrite –** December 2 (cut-off date)
		Upcoming checkwrites: (cut-off dates) December 9th, 16th
		Update on Medicaid Issues:
		BugCentral Status
		Key CSRs
		Operations Support: File Maintenance, Security, and Help Desk
2.	**Area Programs**	**Area Programs, Division and EDS**
		Roll call Please mute phones or refrain from excess activity to help with communications. Please state your name and which Area Program you are from when you speak.
		Review Check-Write December 2nd Upcoming Check-write (cut-off dates) – December 9th, 16th
		Agenda items **Medicaid – Retroactive Report IPKR8102** **December Medicaid Bulletin…** http://www.dhhs.state.nc.us/dma/bulletin.htm Reminder: 2006 Checkwrite Schedule Reminder: Please notify Thelma, Cheryl or Eric if Core Team email addresses change Reminder: After receiving new provider numbers from DMA, please send these numbers to the IPRS QA distribution list: *IPRS.QandA@ncmail.net* IPRS Questions or Concerns
		DMA Direct Provider Enrollment Questions
		MMIS Updates – Tim Sullivan & Shannon Johnson Medicaid Questions or Concerns
		DMH and/or EDS concluding remarks
		Roll Call Updates
		Next Meeting: December 14, 2005
		For assistance with IPRS claims, adjustments, R2Web, accessing application, etc., call the IPRS Help Desk – 1-800-688-6696, ext 53355, M-F, 8:00 a.m. - 4:30 p.m., excluding holidays.
		DMH IPRS Question and Answer email address - iprs.qanda@ncmail.net

ADMINISTRATION NOTES (10:00 a.m. DIVISION AND EDS REVIEW)

Item No.	Topics
1.	**Review Checkwrite from December 2, 2005** Mecklenburg, Centerpoint and Southeastern Regional had a large number of denials for EOB 11. A call from IPRS was made to them. Five County had 3005 denials for EOB 8329. This can be attributed to DPE. Pitt County also had a large number of denials for EOB 8329. Wake County had a number of denials for EOB 8534. There were other various denials for DPE claims as well.
2.	**Upcoming checkwrites:** December 9th, 16th There is also a cutoff on December 30th, but this will be the first checkwrite in January.
3.	**Update on Medicaid Issues:** Delayed Checkwrite for December 2nd – It was partly due to Thanksgiving Holiday and the high volume of claims received. The jobs, particularly auditing, took longer than normal to run as a result. EDS Systems is currently reviewing the list of 50 procedure codes for bypassing TPL and Medicare.
4.	**Bug Central Status:** 973 will be going to customer review.
5.	**Key CSRs:** None discussed. The CSR meeting scheduled for next week will be postponed due to a holiday function at DMH.
6.	**Operations Support – File Maintenance, Security, Help Desk** The 96100 procedure code is now in every Benefit Package. Jamie – We have received outstanding checks from Rockingham, Lee-Harnett and Randolph. IPRS will process the refunds in the 12/9/05 checkwrite cycle.

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	**Topics**
1.	**Roll Call**
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which Area Program you are from when you speak.
3.	**Review Checkwrite – December 2nd** Eva (Five County) – We received a lot of 8329 denials for the December 2nd checkwrite. Response: Send ICNs to IPRS Q&A or call Provider Services.
4.	**Upcoming checkwrite (cut-off dates)** December 9th, 16th

5.	**Agenda items**

Medicaid - Retroactive Report IPKR8102
- Reminder that IPKR8102 reports voided OBH claims from IPRS that need to be resubmitted to Medicaid by the direct enrolled providers. This is the second month this report has generated, and there are more LMEs/APs impacted.

Faye Sanders (Mecklenburg) – Announced she has replaced Adrienna Harris.

December Medicaid Bulletin…http://www.dhhs.state.nc.us/dma/bulletin.htm
- Shannon: It is now available on the DMA website.

Reminder: 2006 Checkwrite Schedule: Will be on the DMA website within the week. A copy was sent out yesterday, and it will also be posted on the IPRS website.

Reminder: Please notify Thelma, Cheryl or Eric if Core Team email addresses change

Reminder: After receiving new provider numbers from DMA, please send these numbers to the IPRS QA distribution list: *IPRS.QandA@ncmail.net*

IPRS Questions or Concerns

Q) Lou Brown (Tideland) – Does the IPKR8102 Report reference denied claims?
A) Paul: No, it references OBH claims that have been paid by IPRS but that have been voided/recouped due to Retroactive Medicaid Eligibility of the associated clients. These claims must be resubmitted to Medicaid by the direct enrolled providers.

Q) Cathy (Rockingham) – Not sure of individual Medicaid provider numbers and how they coincide with IPRS provider numbers. Is the 2310D Loop effective for IPRS?
A) Paul: The 2310D Loop is effective for IPRS. For OBH services, the billing provider number is your group provider number, and the individual's number from Medicaid will be the attending provider number.
A) Thelma: Gave an example.
- A full length description of the example should be included in the meeting minutes.

Q) April (Southeastern Regional) – Medicaid question: How do they bill procedure code 90782?
A) Shannon: You bill the same way as in the past, under the physician's provider number. Eric suggested that the question be sent to IPRS Q&A where it will then be forwarded to Medicaid Provider Services.

Q) Cathy (Rockingham) – Inquired as to what Thelma's phone number is.
A) Eric: 919-733-4460.

Q) Tom (Western Highlands) – They contract with an individual that provides OBH services to IPRS only clients. That provider does not have a PIN. Does that person need to have a PIN/direct enrolled provider number from Medicaid?
A) Thelma: This is still being discussed at the Division. DMH will provide an answer when they have one.

Q) Janet (Johnston) – Can they use a prefix number when submitting claims?
A) Paul: No, it would pay at a lower rate because the prefix number would be considered non-licensed.

Q) Martha (New River) – Has a staff member that sent in their enrollment packet in October, but provided services in September. DMA only backdated the start date to October 1st. How do they get paid for the September services.

A) Thelma: If DMA provider enrollment will not change the date to September 1st because the packet was received in October, you may not be able to bill for those services, however you may be able to recoup some funds at a lowered rate.
A) Marjorie: Suggested that Martha call DMA Provider Enrollment at 855-4050.

Q) Jeanna (Catawba) – Has physician whose direct enrolled number is used by private practice, hospital, etc.
A) Shannon: Requested that Jeanna send her an email and she will take a look at the situation.

Q) Tom (Western Highlands) – How do they submit coordination of benefits from an insurance company for a claim with a non-covered service?
A) Shannon: Submit a paper claim, attach a voucher from the 3rd party, and check the TPL override box on the 3rd Party Override Form. Medicaid will manually override individually for each Date of Service requested.

Q) Tom (Western Highlands) – Should Medicaid services be listed on the CAP report?
A) Shannon: I'm not sure. I will have to look into that.

Q) Kay (Eastpointe) – Update on the TPL codes?
- Shannon: The list of codes has been compiled and sent to Systems for their review of how the 50 procedure codes process today. Once complete, the list will be sent to Carol for review.

Q) Tom (Western Highlands) – Commercial insurance carrier override TPL?
A) Shannon:

MMIS updates
- Shannon: If you received a denial for EOB 286 when submitting a claim with the T1017 procedure code and HI modifier, you can now resubmit these claims.

6. **DMH and/or EDS Concluding Remarks**:

7. **Updates to Roll Call; Other Questions?**

Action Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
AI#.						

Issue Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
II1.						